

REQUEST FOR VARIANCE FROM 326 IAC 4-1 PRESCRIBED VEGETATION BURN

State Form 50864 (R2 / 12-04) INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

NOTE:

Daytime Telephone: (

Name:

11. Address:

7.

- This is an application for prescribed vegetation open burning approval to comply with 326 IAC 4-1. Complete and return this application to the Office of Air Quality address provided in the upper right hand side of the form or fax to 317-233-6865. In case of questions someone may be reached at 317-233-5672 or (in Indiana) 1-800-451-6027 press 0, and ask for extension 3-5672.
- You can fill out this form electronically, using your mouse and keyboard. Simply click inside of the number one (1. Name) field to begin, and advance to the next fields using the "tab" key on your keyboard, or by clicking in the field with your mouse.

Indiana Department of Environmental Management Office of Air Quality - Air Compliance Branch

100 N. Senate Avenue

P.O. Box 6015

Indianapolis, IN 46206-6015 Phone: (317) 233-5672 or

1-800-451-6027 (Indiana Residents Only) http://www.IN.gov/idem/air/compliance

questions someone may be reached at 317-233-5672 or (in Indiana)							
1-800-451-6027 press 0, and ask for extension 3-5672.		FOR OFFICE USE ONLY					
 You can fill out this form electronically, using your mouse a 	iiiu	ARIANCE ID NUMBER	ASSIGNED TO				
keyboard. Simply click inside of the number one (1. Name begin, and advance to the next fields using the "tab" key or							
keyboard, or by clicking in the field with your mouse.							
NOTE							
▶ Please complete the following and return to the Office of Air Quality, Indiana Department of Environmental Management, P.O. Box 6015, Indianapolis, Indiana 46206-6015, 60 days prior to the proposed burning date. A list of names & addresses of all parties potentially affected should accompany this application using State Form 49635 "Identification of Potentially Affected Persons".							
PART A: PERSON MAKING REQUEST							
1. Name:	2. Organization	nization Name:					
3. Address:							
4. City:	5. State:	6. 2	ZIP code:				

PART B: PERSON, CONTRACTOR, OR DEPARTMENT CONDUCTING BURN 10. Organization Name:

Fax Number: (

12. City: **13.** State: 14. ZIP code:

15. Daytime Telephone: (16. Fax Number: (NOTE

A site is that part of the property on which a particular type of vegetation occurs, and a unit is a part of the site upon which the burn will take place.

PART C: PROPOSED BURN

- **17.** Requesting approval for how many years*: ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5
 - * If submitting for more than one year, a burn plan must be included with the application (See the information to be included in a burn plan) and the fire/crew leader must have attended at least one prescribed burn training session presented by DNR or the National Park Service, or other training accepted by IDEM. A certificate or other documentation must be submitted to show proof of attendance of such training. Please note that if the location for burning is in Lake, Porter, Clark, or Floyd counties a variance will not be issued for more than one year.
- **18.** Approximate total number of acres involved:
- 19. Identify units to be burned: (If multiple sites, do not complete this part and a burn plan must be submitted)

Unit	Acres	Planned burn time in hours/day	Projected burning date(s):	Types of vegetation to be burned
A.				
В.				
C.				
D.				
E.				
E				

(Continued on page 2)

¹ Available from the IDEM Office of Air Quality or on the Internet at http://www.in.gov/icpr/webfile/formsdiv/49635.pdf

PART D: ADDITIONAL INFORMATION				
20. If multiple sites, do not complete this part, but a burn plan must be included with the application. See the information to be included in a burn plan.				
Unit	Check all that apply to the unit:			
Α.	Burn Site: Located in an unincorporated area: Within 100 feet of a power line: Within 300 feet of fuel storage area or p	☐ Within 100 feet of a structure: ☐ Within 300 feet of a frequently traveled road: ipeline:		
В.	Burn Site: Located in an unincorporated area: Within 100 feet of a power line: Within 300 feet of fuel storage area or p	☐ Within 100 feet of a structure:☐ Within 300 feet of a frequently traveled road:ipeline:		
C.	Burn Site: Located in an unincorporated area: Within 100 feet of a power line: Within 300 feet of fuel storage area or p	☐ Within 100 feet of a structure:☐ Within 300 feet of a frequently traveled road:ipeline:		
D.	Burn Site: Located in an unincorporated area: Within 100 feet of a power line: Within 300 feet of fuel storage area or p	☐ Within 100 feet of a structure: ☐ Within 300 feet of a frequently traveled road: ipeline:		
E.	Burn Site: Located in an unincorporated area: Within 100 feet of a power line: Within 300 feet of fuel storage area or p	☐ Within 100 feet of a structure:☐ Within 300 feet of a frequently traveled road:ipeline:		
F.	Burn Site: Located in an unincorporated area: Within 100 feet of a power line: Within 300 feet of fuel storage area or p	☐ Within 100 feet of a structure:☐ Within 300 feet of a frequently traveled road:ipeline:		
		REQUIRED IF SUBMITTING BURN PLAN)		
21. Site Address or directions from roads/street/intersection/and which side of road:				
22. City:		23. County:		
24. Fire Dep	artment having jurisdiction (include address):			
PART F: SIGNATURE				
PARTT. SIGNATURE				
I hereby certify that the information above and the attached burn plan are accurate to the best of my knowledge.				
Signature		Date: (mm/dd/year)		
Type or Print	Name	Title		